

Attention All Medical Marijuana Establishment Applicants,

So the Division's Medical Marijuana Program can post your scores and rankings on its website, we ask that the applicant or authorized designee sign the accompanying "Consent to Release Medical Marijuana Establishment Results on the DPBH Medical Marijuana website," and return this form with your MME application. Applicants who are unwilling to sign the release will not have the above information shared on our website.

Thank you for your cooperation.

BRIAN SANDOVAL
Governor

STATE OF NEVADA

ROMAINE GILLILAND
Director



RICHARD WHITLEY, MS
Administrator

TRACEY D. GREEN, MD
Chief Medical Officer

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH**

**Consent to Release Medical Marijuana Establishment Application Results on the
DPBH Medical Marijuana Website**

I, _____, am the duly authorized designee of _____

_____ to represent and interact
with the Division of Public and Behavioral Health (DPBH) on all matters and questions regarding the
application for a Nevada Medical Marijuana Establishment Registration Certificate(s).

I understand that although NRS 453A.700 provides confidentiality for applications submitted to the Division,
I agree that the Division may post on their website, <http://health.nv.gov/medicalmarijuana.htm>, our
Applying Entity Name, as identified on Attachment A of your MME Registration Certificate Application
(page 29), our score, and our ranking.

By signing this Consent to Release Information, I hereby acknowledge and agree that the State of Nevada, its
subdivisions, including DPBH, and its employees are not responsible for any consequences related to the
release of the information identified in this consent. I further acknowledge and agree that the State and its
subdivisions cannot make any guarantees or be held liable related to the confidentiality and safe keeping of
this information once it is released.

_____ Date: _____

Signature of Requestor/Applicant or Designee